

A4 Submission on the NDIS New Framework Planning



Autism Aspergers Advocacy Australia

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Preface

[*Autism Asperger Advocacy Australia*](#), known as A4, appreciates the opportunity to provide feedback on the NDIS new framework planning. We sincerely hope that our contribution is seen as constructive despite its being ignored.

A4 is concerned that the NDIS expects to move 70-80% of autistic children off the NDIS in the near future – see <https://a4.org.au/node/2772>

However, a substantial and growing number of autistic NDIS participants will remain in the scheme, and they will need better NDIS planning than they get currently.

About A4

A4 was created as a national grassroots organisation in 2002, to provide systemic advocacy for Autistic Australians and others affected by autism.

A4 has been recognised nationally as a Disability Representative Organisation (DRO) for people with autism.

Vision

Autistic people (or people with Autism Spectrum Disorder - ASD) in Australia will:

1. live as independently as they can; and
2. choose and achieve their personal goals and aspirations.

All Australians will:

1. remove barriers to the participation and achievement of autistic people (or people with ASD), their families and carers;
2. recognise and value the contributions that autistic people (or people with ASD), their families and carers make to their community;
3. respect and appreciate the diversity that autistic people bring to their community and to the nation; and
4. ensure autistic people (or people with ASD), their families and carers can receive, in a timely manner, the education, treatment, services, support, protections, participation and opportunities that they need.

Mission

Autism Aspergers Advocacy Australia will:

1. advocate nationally for progress towards our vision;
2. educate and inform people in Australia about Autism Spectrum Disorder; and
3. monitor and report on issues and outcomes relating to autistic people (or people with ASD) and their associates.

Utopian dream

A4 hopes that one day, it will not be needed: that Australian government and society will recognise and address the support needs of autistic people without needing a frank and forthright organisation to promote their interests.

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Introduction

The NDIS Review correctly indicated that the NDIS needs “to improve the planning process and focus on a person’s disability support needs”.

The Review was wrong to suggest that the NDIS already focussed on “diagnosis or functional impairment”. The NDIS has shown repeatedly that it does not understand autism diagnosis, or the support needs that arise from “functional impairment” due to autism.

The NDIS’s so-called Discussion Paper, in the section headed *Purpose of this consultation*, states clearly that the Agency “explain how the new framework planning rules will work”. It mentions seeking feedback ... but as indicated, how it will work is already determined. It gives no purpose for the feedback. Following is a description of serious problems with the new NDIS Planning Framework, as we understand it.

A4 has limited understanding because there is no clear description of how the new framework will be applied to autistic NDIS participants.

NDIS Legislation

About participants’ goals

The [*NDIS Act 2013*](#) (as amended) clearly requires that a NDIS participant provides their goals. Notably, there are zero explicit constraints on a participant’s goals. In particular, there are no limits on words, number of goals or subject matter despite what some NDIS officials tell (or demand of) participants, their carers and associates.

Participant goals are most effective when they relate to participants aspirations and impairment related support needs.

In relation to goals, the *NDIS Act 2013* says:

31 Principles relating to plans

The preparation, variation, reassessment and replacement of a participant’s plan, and the management of the funding for supports under a participant’s plan, should so far as reasonably practicable:

(a) ...; ...and

(f) support communities to respond to the individual goals and needs of participants; and

(g) ...; ... and

(j) facilitate tailored and flexible responses to the individual goals and needs of the participant; and ...

Also, it says ...

32D Matters that must be included in a participant’s plan

Participant’s statement of goals and aspirations

(1) A participant’s plan must include a statement (the ***participant’s statement of goals and aspirations***) prepared by the participant that specifies: ...

Statement of participant supports

(2) A participant’s plan must include a statement (the ***statement of participant supports***), prepared with the participant and approved by the CEO, that specifies: ...

Note that s32D(1) says “the ***participant’s statement of goals and aspirations***” is “prepared by the participant”¹, and s32D(2) say “a participant’s plan”, also called “the ***statement of participant supports***”, is “prepared with the participant”. The words, “by” and “with” are central. But NDIS officials often ignore their meaning.

Shockingly, goals are not mentioned in the planning process outlined in the new planning framework. The new planning framework cannot meet its legislative requirements while it ignores participants’ goals.

The NDIS would work much better were it to give participant’s goals the attention that was originally intended and is required by its legislation.

The whole NDIS needs its planning process to:

1. review goals and outcomes from any previous NDIS plans;
2. work *with* participants to establish measurable outcomes for each goal;
3. agree what NDIS supports will deliver or assist with the agreed goal outcome measurement; and
4. review and report the outcomes measures.

Unfortunately, the NDIS decided already that this is not what it will do.

Notice of Impairments

The Discussion paper notes that a participant must be issued with a *Notice of Impairment* that informs “them about the category or categories of impairments for which they meet access to the Scheme”.

This description is not consistent with the law. S32BA(2) of the NDIS Act 2013 says ...

(2) The notice must state:

(a) if the participant meets the disability requirements—the categories of impairments under subsection (3) that cover the impairments in relation to which the participant meets those requirements; and

The Notice of Impairment describes all a participant’s impairments that meet s24, not just those needed to “meet access to the Scheme” at their initial intake.

¹ It does not involve or require any input from Agency officials.

A4 has reports that the NDIA's incorrect understanding of the Notice of Impairments is already appearing in planning processes and in arguments being put in ART matters.

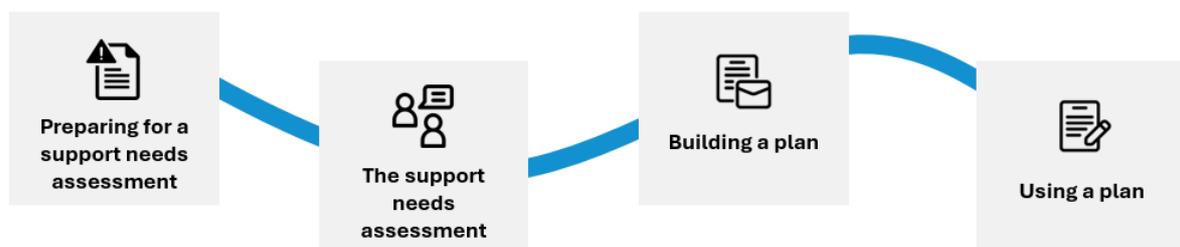
This requires that new and changing impairments that satisfy s24 requirements are added to a participant's Notice of Impairments. It would be sensible to include formally a review of impairment status to properly inform the assessment and planning process.

A4's understanding of this issue may be consistent with a recent Federal Court decision (that confirmed a previous ART decision) – see <https://www.abc.net.au/news/2026-03-04/ndis-agency-loses-significant-legal-case-scooter-funding/106405304>

It is A4's understanding that the CEO's decision about a participant's Notice of Impairment is not a reviewable decision. That is unacceptable.

New framework planning process

The NDIS's Discussion Paper provides the following description of the new process.



At this level, the process seems the same as before ... except it uses the term “support needs assessment” explicitly (it was implicit in the previous process).

Preparing for a support needs assessment

Participants and clinicians need substantially better information than is currently available to prepare for a needs assessment.

Participants have a choice:

- they can start the planning process open to the NDIS's proposals; or
- they can prepare their own view of how they expect the NDIS to address their recognised support needs.

The NDIS needs to be open to either approach.

Participants are advised to discuss the applicant's goals and support needs with their treating clinicians if any in the context of their Notice of Impairments. They could develop support proposals that the NDIS should consider either during needs assessment or plan building.

Support needs assessment

This aspect of the NDIS is a major issue in relation to autistic participants.

The NDIS does not have any needs assessment tools that have been properly validated for autistic NDIS participants.

Assessment for autistic NDIS participants has been a chronic issue for the NDIS from the outset. The NDIS refuses to properly collect the diagnosis and functional assessment that is a standard part of any DSM-5 or DSM-5-TR diagnosis of autism spectrum disorder. DSM-5 diagnosis reports require two statements of support needs: see <https://a4.org.au/index.php/node/2647> but the NDIS *refuses* to record this information.

The NDIS adopted the I-CAN assessment tool that has not been validated for autistic participants.

The NDIS does not have a validated tool for support needs assessment of autistic NDIS participants ... who are the biggest primary disability type in the NDIS.

Similarly for children. The NDIS often accepts, and sometimes requires, PEDI-CAT assessments for autistic children. It knows that these assessments systematically under-rate autistic impairment. The NDIS knows that the authors of the PEDI-CAT assessment readily recognise that their PEDI-CAT is inappropriate for assessing autistic children which is why they themselves developed the PEDI-CAT (ASD) for assessing autistic children.

Yet the NDIS accepts PEDI-CAT assessments from clinicians for autistic children – they don't even ask the clinicians to provide a PEDI-CAT (ASD) assessment. It is also concerning that a registered clinician who provided a PEDI-CAT assessment for an autistic child in evidence at the ART told the Tribunal that they did not know the PEDI-CAT (ASD) existed. This indicates a substantial gap in the capability of clinicians in the disability workspace.

The NDIS has responsibilities for workforce capability.

While the PEDI-CAT (ASD) may improve on the standard PEDI-CAT assessment, it also has its limitations. The NDIS commissioned the Autism CRC to review the PEDI-CAT (ASD). [Their review](#) concluded that:

The PEDI-CAT (ASD) had adequate psychometric properties and acceptability as a measure of Activities and Participation codes. However, it lacks comprehensiveness and relevance when compared to the ICF Core Sets for ASD and has the potential to overestimate functioning.

The NDIS did not adopt the PEDI-CAT (ASD), instead preferring the original PEDI-CAT that “overestimate functioning” even more. In other words, it underestimates support needs.

The NDIS needs to invest in research and development of properly validated assessment tools for the whole autism sector. This is a complex process and

can only be achieved through working with the whole autism sector ... which includes people with severe and profound autism, their families and close associates. The NDIS needs to stop excluding and ignoring their representatives.

Building a plan

The law requires that a participant's plan is based on the participant's goals. The NDIS new framework planning does not do that.

The planning process needs a good support needs assessment to work properly. As shown above, the NDIS does not have a process for getting a proper support needs assessment for autistic participants.

So the NDIS will build plans for autistic NDIS participants that are based on needs assessments made without needs assessment tools validated for autistic subjects. This planning process for autistic NDIS participants is unacceptable.

Nor is it clear to planners what are NDIS supports for autistic NDIS participants. When the status of a support is unclear, participants are typically denied supports when there is doubt/uncertainty.

This is especially the case for autistic participants with high support needs. For example, planners do not plan to provide best-practice evidence-based early intervention for autistic children. Contrary to the UN CRPD, NDIS policy is to send autistic children with the highest needs into more arduous and unreasonably adversarial ART review process to get the support they need (for example, see <https://a4.org.au/node/2567>) ... where the lack of support needs assessment becomes especially apparent. It should be as easy or easier for people with high support needs to access the supports they need; it should not be harder.

Using a plan

There is a lot of confusion over NDIS supports. The NDIS was told about issues but does nothing. For example, the s10 List for early intervention says:

Early intervention supports for early childhood

Supports that are evidence-based early childhood intervention supports for children 0-9 years (including children aged 0-6 with developmental delay) and their families to achieve better long-term outcomes for the child.

This includes:

- therapy provided by allied health professionals including speech pathologists and occupational therapists
- a key worker for a child's family.

Notably, A4 has never seen the NDIS fund a key worker in a NDIS plan. Nor is there a key worker item in the price guide. A4 has not seen discernible action from the NDIS to increase workforce capability or capacity in its key worker model.

The other issue is that risk-averse planners (as many are) take the NDIS at its word, that things on the s10 list are NDIS support – and things not mentioned on the list are not. The above mentions only “therapy provided by allied health professionals including speech pathologists and occupational therapists”. Since other therapy type are not mentioned, planners prefer to safely limit plan elements to *only* speech and occupational therapy.

Speech and occupational therapists are not trained as key workers.

As we have said before, having “in” and “out” lists means that most things are in neither list. So, the status of anything not on either list is unknown. But plan managers and the people who approve payments will often be cautious and refuse payment if in doubt.

Nor do the lists recognise the context for supports. Autistic people don’t usually need a wheelchair for their autism. Speech therapy is not usually needed for a limb amputation.

We need a process for pre-approving supports. The post-service approval process is unfair and damaging to participants.

Plan management can be a challenge for NDIS participants since the information they can access is confusing ... and sometime wrong. It is hard for people to understand their plan funding. In a recent ART hearing, the NDIS provided this as the current state of the Applicant’s plan:

Plan Budget Forecast

Client: [REDACTED]

	Amount	Average Daily Spend	Start Date	End Date	Budget at End Date	Forecasted Budget Consumption Date
Core Flexible Budget Total	\$144,147.04				\$37,214.42	
Assistance with Daily Life	\$126,130.36	\$117.26	09/10/2025	08/10/2026	\$63,448.76	19/09/2026
Consumables	\$7,903.56	\$0.00	09/10/2025	08/10/2026	\$7,903.56	08/10/2026
Assistance with Social, Economic and Community Participation	\$10,113.12	\$176.51	09/10/2025	08/10/2026	-\$54,137.89	05/12/2025
Capacity Building Total	\$28,896.76				\$14,820.75	
Support Coordination and Psychosocial Recovery Coaches	\$6,008.40	\$14.25	09/10/2025	08/10/2026	\$821.04	05/12/2026
Choice and Control	\$1,253.40	\$3.21	09/10/2025	08/10/2026	\$83.56	03/11/2026
Improved Daily Living Skills	\$21,344.96	\$22.61	09/10/2025	08/10/2026	\$13,116.15	10/05/2026

This table from the NDIS portal suggests that the NDIS participant (Applicant in this ART review) would have \$83,448.76 available at the end of the plan for Assistance with Daily Life. But the total projected that would be available at plan end would be \$37,214.42 ... which is much less than the Assistance with Daily Life component. That just does not add up.

The NDIS provided the following claiming it was the current level of funding in the Applicant’s plan.

Core Flexible (Plan-managed)						
View claims made by this support						
Support Category	Funded amount	Released	Spent	Available to spend	Next release	Action
Assistance with Daily Life	\$126,130.36	\$126,130.36	\$15,243.43 (12%)	\$110,886.93 (88%)	N/A	More
Assistance with Social, Economic and Community Participation	\$10,113.12	\$10,113.12	\$25,039.30 (248%)	\$-14,926.18 (-148%)	N/A	More
Consumables	\$7,903.56	\$7,903.56	\$0.00 (0%)	\$7,903.56 (100%)	N/A	More
Transport	\$0.00	\$0.00	\$0.00 (0%)	\$0.00 (0%)	N/A	More
Total	\$144,147.04	\$144,147.04	\$40,282.73 (28%)	\$103,864.31 (72%)		More

The ART member refused the Applicant document but accepted the NDIS’s document. This shows clear bias from the ART Member: she should have put both into evidence then explained which she gave the most weight.

The amount shown as “Available to spend” in the Assistance with Daily Life” (\$110,886.93) is incorrect. The maximum available in that category is the same as the Core total available (\$103,864.31).

As well as confusing information, the fact that what NDIS officials see is different from what the participants sees is a major concern. Previously, this participant was unable to get his NDIS planner to recognise that his funds were almost exhausted. His numerous requests for replenishment were ignored. Nothing happened until he contacted the NDIS Minister and his MP – then the NDIS gave him a new plan (without consultation or ART permission). It should not be necessary to involve politicians in NDIS plan usage issues.

The NDIS must improve the ways it shows data about participant plans to everyone.

Lack of Independent Monitoring Mechanism

The UN CRPD requires an Independent Monitoring Mechanism (IMM). No such mechanism exists. The monitoring should be reporting like the *Closing the Gap* monitoring, but there is very little of this monitoring. And what monitoring there is (such as the ABS SDAC) is increasingly infrequent² and ignored by much of government, especially the NDIS.

Federal government needs to take seriously the especially poor outcomes that autistic Australians are reported as experiencing such as in education, employment, and general wellbeing.

Advocates find the NDIS does not respond to many Freedom of Information requests for basic data.

² See <https://a4.org.au/node/2748>

Conclusions

The NDIS is not consulting or co-designing about its new Framework Planning. The Crikey article, [*New NDIS reform is in chaos, insiders say*](#) (5/3/2026) shows that the NDIS had already decided what it would do, and is now finding serious difficulty implementing it. And providing a feedback process that we know will be ignored completely disrespects disability the Australian community.

A4 made numerous practical suggestions about how better assessment and planning for autistic NDIS participants can be achieved. We know our suggestions will be ignored.